

6/19/01
11 AM

05-341965
PERMIT

P 515295
A REPAIR

SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
410-313-2640

ISSUE DATE 6/18/2001

APPROVAL DATE 6/21/01

INDEXED

Zepp Plumbing & Heating, Inc IS PERMITTED TO INSTALL ALTER

ADDRESS 6344 Ten Oaks Road, Clarksville, MD 21029 PHONE 410-531-6712

PROPERTY OWNER Karen Auld PROPERTY OWNER'S ADDRESS 11501 Crows Nest Road

SEPTIC TANK CAPACITY 1000 TS GALLONS

PUMP CHAMBER CAPACITY N/A GALLONS

NUMBER OF BEDROOMS 3

SQUARE FEET PER BEDROOM 180

DEPTH OF TRENCH REQUIRED _____

REMARKS: Trenches to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. _____ feet of stone below distribution box.

REASON: _____
REPAIR-PURPOSE- in support of building permit (for addition)
Call for inspection when ground is opened so sanitarian can recommend repair. 03/03/99

**BUILDING PERMIT SIGNED
AND RETURNED**

51605 BOD 163556 - 2 CAR GARAGE

PERMIT APPROVED _____ DATE _____

PERMIT VOID AFTER 2 YEARS

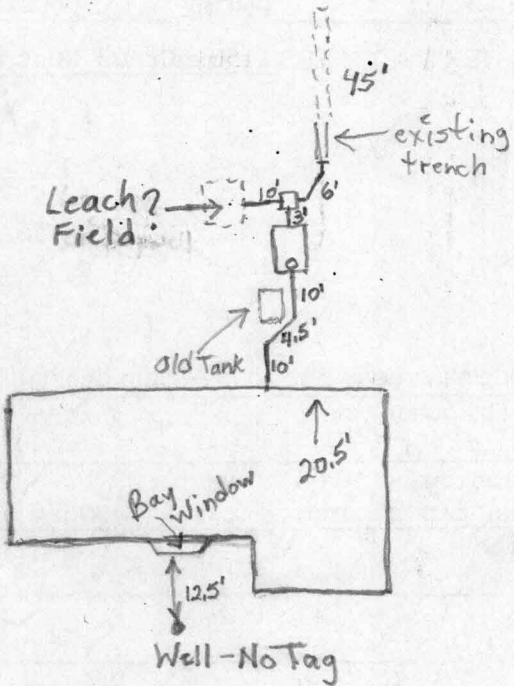
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS ARE NOT ACCEPTABLE
- NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, DRAINFIELDS) TO BE 100 FEET FROM ANY WATER WELL UNLESS OTHERWISE SPECIFICALLY AUTHORIZED
- NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED
- NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS
- NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES
- NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

PERMIT SIGNED
AND RETURNED 6/13/2001
B00130815 Add bedroom, remodel
3 baths + kitchen. Convert existing garage
to living room and powder room.

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

1515295

NOT TO SCALE



TRENCH DATA

TRENCH WIDTH _____
 TRENCH INLET DEPTH _____
 TRENCH BOTTOM DEPTH _____
 DEPTH OF STONE _____
 NUMBER OF TRENCHES _____
 TOTAL TRENCH LENGTH _____
 ABSORBENT AREA _____
 DISTRIBUTION BOX LEVEL _____
 BAFFLE IN DISTRIBUTION BOX _____

SEPTIC TANK DATA

SEPTIC TANK 1500 TS GALLONS
 MANHOLE RISER No
 6 INCH INSPECTION PORT Yes

PUMP CHAMBER DATA

~~PUMP CHAMBER GALLONS _____
 MANHOLE RISER _____
 ALARM _____
 PUMP PERFORMANCE TEST _____~~

Crows Nest Road

PRE-CONSTRUCTION INSPECTION: _____

INSPECTION COMMENTS: 6/19/01 Tank set. O.K. to cover. Plumber to call when old tank is to be filled. (BB)
6/21/01 Bepp plumbing called and said old tank filled in. (BB)

INSPECTOR BB. Baker DATE SYSTEM APPROVED 6/21/01